

# EXPEDITED RFQ NOTIFICATION SHEET

## Office of Contracts and Rate Setting

State of Michigan

Department of Human Services

Notice of a request for quotations or a request for proposal is hereby given Pursuant to Act No. 124 of the Public Acts of 1999.

Amount: \$27,600 (\$9,200 per fiscal year)	ITB Number DHS SFSC 10-29001
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**Bid Description:**

Gratiot County Strong Families Safe Children contract for parent education, group classes. The selected provider will either develop a DHS approved parent education curriculum, or maintain and present a nationally recognized one; arrange classroom space in locations accessible to referred clients; and schedule classes during evening hours or at times agreed upon by the Clinton Co. DHS.

Classes shall be at minimum one hour in length, and the bidder shall state the number of classes offered per year. The DHS shall make all referrals.

The provider shall possess at minimum a bachelor's degree in education, child development, social work or a related field.

Begin and end dates: 10/1/09 through 9/30/2012

No RFQ is attached. This is a small dollar contract. Contact the staff listed below for details.

**Due Date for Response:**

July 22, 2009

Contact Person Name: Dan Carley	Phone #: (989) 875-8228
E-Mail Address: carleyd2@michigan.gov	

## Instructions for completing the CM-470EX Form

The CM-470EX form requires the following information. Type or print clearly. Submit form to the Office of Contracts and Rate Setting (OCRS) at least **three weeks** prior to the bid or proposal due date.

### Amount

Enter the total amount which has been authorized for the entire period of the contract for which you are seeking a bid or proposal, even though bids or proposals are expected to come in at a lesser amount.

### ITB Number

The invitation to bid (ITB) number is a fifteen character number which, for DHS, is constructed as follows:

- a) The first three characters are **DHS** (already included on the form).
- b) The next five characters are derived from the acronym customarily used to describe the contract type being sought. If an acronym (GUARD for Guardianship, for example) exceeds five characters, just use the first five. If an acronym (DV for Domestic Violence, for example) has less than four characters, substitute an underscore for each of the absent characters.

Examples: GUARD (Guardianship) becomes GUARD  
FF (Families First) becomes FF\_\_\_\_  
PRV (Prevention) becomes PRV\_\_\_\_

- c) The next two characters are digits which represent the fiscal year in which the service will be purchased.
- d) The next two characters are digits representing the county in which most services being sought will be delivered. If the purchase is to be statewide, use "99."
- e) The last three characters are digits which sequentially identify which of that county's RFQs this is for that contract type. So, for example, if the ITB number identifies a county's fourth RFQ for a particular contract type, the number would be **004**. The county should maintain, for a particular contract type, only one sequence of numbers covering both RFQs, not a separate sequence for each.

As an example, ITB number **DHSCAN06-23003** would identify the third RFQ issued by Eaton County for services dealing with child abuse and neglect.

### Bid Description

The bid description begins with the name of the **county** in which most of the services will be delivered. (Use the word "Statewide" for contracts to deliver services statewide.) The county name will be followed by an identification of the **type of contract** being sought. Following that will be a listing of the **services to be delivered** under that contract. Examples:

Kent County – Child abuse and neglect contract for parent aide services;  
Eaton County – Delinquency contract for day treatment;  
Washtenaw County – Domestic violence contract for emergency shelter, crisis counseling and hot line services.

### Due Date

This is the deadline for the submission of bids or proposals. The bid information required by this notification must appear on the DMB website for at least three weeks prior to the due date.

### Contact Person

This information is **mandatory**. After entering the information required by this form, it should be emailed to the DHS Office of Contracts and Rate Setting at [DHS-OCRS@michigan.gov](mailto:DHS-OCRS@michigan.gov). OCRS will forward the information to the Department of Management and Budget Office of Purchasing.